

POSITION	INITIALS	ID NO.	DATE
<b>FEES DETERMINATION</b>		64181	12-14-99
<b>O.I.P.E. CLASSIFIER</b>		7	12-27-99
<b>FORMALITY REVIEW</b>		7-7-2	1-11-00
<b>RESPONSE FORMALITY REVIEW</b>		7/10/22	8-1-00

## INDEX OF CLAIMS

..... Rejected N ..... Non-elected  
 ..... Allowed I ..... Interference  
 (Through numeral)... Canceled A ..... Appeal  
 ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	Y	Y	12/13/99
2	0	V	12/13/99
3	V	V	12/13/99
4	0	0	12/13/99
5	0	0	12/13/99
6	0	0	12/13/99
7	0	0	12/13/99
8	0	0	12/13/99
9	0	0	12/13/99
10	0	0	12/13/99
11	0	0	12/13/99
12	0	0	12/13/99
13	0	0	12/13/99
14	0	0	12/13/99
15	0	+	12/13/99
16	0	+	12/13/99
17	0	+	12/13/99
18	Y	V	12/13/99
19	V	V	12/13/99
20	V	0	12/13/99
21	V	0	12/13/99
22	V	0	12/13/99
23	V	0	12/13/99
24	0	V	12/13/99
25	0	V	12/13/99
26	0	V	12/13/99
27	V	V	12/13/99
28	V	V	12/13/99
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If more than 150 claims or 10 actions  
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